

A Study to Assess the Stress and Coping Strategies Adopted by Primary Care Givers of Schizophrenia Patient

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Abstract: ***Background:** Schizophrenia is one of the most devastating psychiatric disorders that affects about 1% of the world population. Schizophrenia represents 1.3% of disability life years overall and fourth leading cause of disability in the developed world and 90% of populations are untreated in developing countries. World Health Organization estimated that about 40-90% of patient with schizophrenia live with their families. Many individuals with schizophrenia revolve between hospitals and shelter homes. The major reason for rehospitalisation of patients is due to stress and improper coping mechanisms used by the patients and family members who caused in lack of quality care to the patient. **Objective of the study:** To assess the stress and coping strategies adopted by primary care givers of schizophrenia patient. **Material and method:** The study adopted a descriptive research design, 100 samples were recruited using convenient sampling technique. Socio Demographic Proforma, Perceived Stress Scale to assess the stress and Brief COPE scale to assess the coping strategies were used to collect data. Descriptive and inferential statistics were used to analysis the data. **Result:** The study revealed that majority of the samples that was 59% participants were female, 59% were age group of more than 40 years, 63% belongs to Hindu religion, 40% were educated up to Higher Secondary, 72% were married, 35% of samples monthly family income were more than 40,000, 73% samples belonged to nuclear family, 38% of samples had private service, 69% of samples were from urban area, 59% samples were parents of the patients, 43% were providing care to patients since 7-10 years. Majority i.e.88% of the caregivers suffers from moderate level of stress and only 12% feels high stress. It also revealed that out of 100 samples, self distraction (7.66) was used most frequently by the caregivers to cope with the stress, denial (2.04) and self blame (2.04) were least frequently used by the caregivers to cope with the stress. It was found that there is significant association between the stress and selected demographic variables like gender, educational qualification, marital status, monthly family income, occupation, area of residence, duration of care and there is significant association between the coping strategies and selected demographic variables at 0.05 level of significant. Study revealed that there is a moderately negative significant co- relation between stress and coping strategies (r -value= -0.519, p -value=0.000) at 0.05 level of significant. **Conclusion:** Study concluded with the clear suggestion that stress can be leads to psychiatric illness in future life. Therefore, immediate action should take to reduce the stress and cope with all stressful events. Educating and creating awareness among the people can help to overcome the stress with come coping strategies. Planned teaching program or structure teaching program to nurses can be implemented which will broaden the knowledge for caregivers. There is need of conducting such program and research frequently.*

Keywords: Schizophrenia, Primary caregivers, stress, coping strategies

1. Introduction

Schizophrenia is one of the most burdensome and stigmatized illness in the world especially in the current era of deinstitutionalization. It is a psychiatric diagnosis denoting a persistent, often chronic, mental illness variously affecting behaviour, thinking, emotion and perception of individuals. It is a heterogeneous disorder defined by sustained periods of psychosis and functional deterioration in the major areas of life, such as interpersonal relations, education, employment and self-care. Schizophrenia ranks 6th in the league of causes of disability worldwide as measured by Years of Life Lived with Disability (YLD).¹ Schizophrenia is the most common and a major mental illness that not only affects an individual, but also has an adverse impact on his or her family members and care givers. This is due to the chronic nature of the illness and long term disability it often involves.²

Schizophrenia symptoms can be divided into positive and negative symptoms. Patients experience problems related to both positive symptoms such as aggressive behaviours, delusions, hallucinations and negative symptoms such as

anhedonia, alogia, asociality, affective flattening or blunting, attentional impairment, avolition-apathy, poverty of speech and thought, loss of motivation and inadequate self care.³

According to Selye (1956), "Stress is the non specific response of the body to any of demand made upon it to adopt, whether that demands produce pleasure or pain".⁴ Pearlin and Schooler defined coping as, 'any response to external life strains that serves to prevent, avoid, or control emotional distress'.⁵

Therefore, family members of clients with schizophrenia are placed in constant stress due to never ending and ever growing problems. The caregivers calls for extra adjustments and coping to deal with the ongoing stress.² Hence the study is conducted to assess the level of stress and coping strategies among family members of schizophrenia patients.

As schizophrenia begins early in life, it causes significant and long lasting impairments, which are largely responsible for the poor well being of the person. The stimuli or stressor influence the person to take a step-in order to overcome the challenges through the coping strategies either negatively or

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positively. The person can make use of either active or passive coping strategies in overcoming the challenges. This means that the stress perceived by the person will influence the coping strategies employed by them. Thus affects the levels of adaptation.⁶ Thus the study of stress is very important in understanding its role in relationship to physical and emotional health.

Evidences form review of research reported by Baatra B.S, Dr. Ghildiyal R, Dr. Mathews. M, on "Coping strategies among care givers of patients with schizophrenia: A descriptive study" at tertiary care hospital of Nagpur, India; revealed that necessary step should be taken to enhance the coping strategies of the caregivers such as acquiring social support and mobilizing family to accept help by the psycho education session.⁷ A study conducted by Rahman F. et. al on "Coping strategies of family caregivers of patients with schizophrenia in Iran", 2th October, 2017; reported that family caregivers of patients with schizophrenia experience a high level of burden, which can put them at risk of using maladaptive coping strategies. Mental health professionals should plan programs that support both family caregivers and patients clinical and community settings.⁸

Health care providers, especially mental health nurses should consider the patients and their caregivers as a whole and provides psycho education to reduce the negative psychological impact of caregivers.

Further reviewing the literature, it was found that limited Indian nursing researchers have done some scientific studies regarding the level of perceived family stress and coping strategies.⁹ Hence it is found that there is a need for study about the stress and coping strategies of primary caregivers of schizophrenia patients for generating information. There is a paucity of published studies conducted in Assam regarding the stress and coping strategies among the caregivers of schizophrenia patients and hence inspire the researcher to take up a study on the assessment of stress and coping strategies adopted by the caregivers of schizophrenia patients. The study was undertaken with the following objectives:

- 1) To assess the stress among the primary caregivers of schizophrenia patients.
- 2) To evaluate the coping strategies among the primary caregivers of schizophrenia patients.
- 3) To correlate stress and coping strategies among the primary caregivers of schizophrenia patients.

2. Materials & Methods

A descriptive research design was adopted with the aim to assess the stress and coping strategies adopted by primary caregivers of schizophrenia patients Psychiatry department of Gauhati Medical College Hospital (GMCH), Guwahati, Assam. From the psychiatry department (both Inpatient and Outpatient department) 100 samples were recruited by using convenient sampling technique. A structured Socio Demographic Proforma which consist of 11 items related to socio demographic variables, Perceived Stress Scale (Sheldon Cohen, 1983) to assess the stress and Brief COPE scale (Carver, C.S. 1997) to assess the coping strategies were used to collect data through interview schedule. Content

validation of structured socio demographic proforma was done by five Nursing and Psychiatry experts. The reliability of the Perceived stress scale was 0.78 and of the Brief COPE Scale was established by using Cronbach's alpha method i.e. 0.71 which indicate that the tool were reliable. Prior to data collection administrative approval, ethical committee clearance and consent from the samples were obtained. Descriptive and inferential statistics were used to analysis the data.

3. Analysis and Interpretation

Data were collected from 100 primary caregivers of schizophrenia patient with the study aim to assess stress and coping strategies adopted by primary caregivers of schizophrenia patients in GMCH, Guwahati, Assam. The analysis and interpretation of data was done by using descriptive and inferential statistics based on the study objectives.

Socio-demographic Proforma of Subjects:

Table1 revealed that majority of the samples that was 59% participants were female, 59% were age group of more than 40 years, 63% belongs to Hindu religion, 40% were educated up to Higher Secondary, 72% were married, 35% of samples monthly family income were more than 40,000, 73% samples belonged to nuclear family, 38% of samples had private service, 69% of samples were from urban area, 59% samples were parents of the patients, 43% were providing care to patients since 7-10 years.

Table 1: Frequency and percentage distribution of demographic proforma of samples according to their gender, age, religion, educational qualification, marital status, monthly family income, type of family, occupation, area of residence, relationship with patient and duration of care, N=100

Characteristics	Category	Respondents	
		Frequency	Percentage
Gender	Male	41	41%
	Female	59	59%
Age	18	0	0%
	19-25	9	9%
	26-30	0	0%
	31-35	0	0%
	36-40	32	32%
	>40	59	59%
Religion	Hindu	63	63%
	Islam	28	28%
	Christian	9	9%
Educational qualification	Illiterate	12	12%
	Lower primary	12	12%
	Upper primary	7	7%
	High school	9	9%
	HS	40	40%
Marital status	Degree or upper level	20	20%
	Married	72	72%
	Unmarried	9	9%
	Widow	12	12%
	Widower	4	4%
Monthly family income	Divorced	3	3%
	<10,000	12	12%
	10,000-20,000	12	12%
	20,001-30,000	28	28%

	30,001-40,000	13	13%
	>40,000	35	35%
Types of family	Nuclear family	73	73%
	Joint family	19	19%
	Extended	8	8%
Occupation	Unemployed	22	22%
	Government service	13	13%
	Private service	38	38%
Area of residence	Self-employed	27	27%
	Urban	69	69%
	Rural	22	22%
Relationship to patient	Semi-urban	9	9%
	Parents	59	59%
	Spouse	8	8%
	Sister/brother	30	30%
	Child of patient	2	2%
	Close friend	1	1%

Assessment of stress of primary caregivers of schizophrenia patients:

The assessment of stress of primary caregivers was done by using Perceived Stress Scale (PSS) and frequency and percentage, mean, median, mode, standard deviation, minimum stress score and maximum stress score was calculated. The stress of primary caregivers has been categorized into three categories, namely mild, moderate and severe.

Table 2: Mean, Median, Standard deviation of caregivers stress, N=100

Mean	Median	Mode	Min ^m stress score (0)	Max ^m stress score (40)	Mean standard error	Standard deviation
21.79	22	22	14	28	0.3881	3.862

The data presented in table 2 shows that the mean stress score is 21.79, median is 22, mode is 22, mean standard error is 0.3881 and standard deviation is 3.862.

Table 3: Frequency and percentage distribution of caregivers by stress score range

Stress	Score range	Frequency	Percentage %
Low stress	0-13	0	0%
Moderate stress	14-26	88	88%
High perceived stress	27-40	12	12%

Data presented in Table 3 showed that majority i.e. 88% of caregivers suffers from moderate level of stress and only 12% feels high stress.

Assessment of coping strategies of primary caregivers of schizophrenia patients:

The assessment of coping strategies of primary caregivers was done by using Brief COPE scale and frequency and percentage mean, median, mode, standard deviation was calculated. The overall coping strategies has been classified according to Mean± Standard deviation (SD).

Table 4: Mean, Median, Standard deviation of caregivers coping strategies, N=100

Mean	Median	Mode	Range	Mean standard error	Standard deviation
69.31	71	71	19	0.601	6.008

Data in table 4 revealed that the total mean for coping is 69.31; median 71, standard deviation is 6.008 and mean standard error is 0.601.

Table 5: Frequency and percentage distribution of caregivers according to the level of coping strategies

Coping strategies	Score range	Frequency	Percentage %
Inadequate cope	28-62	24	24%
Moderate cope	63-75	68	68%
Adequate cope	76-112	8	8%

Data presented in table 5 revealed that majority i.e. 68% had moderate cope, 24% had inadequate cope and 8% had adequate cope.

Table 6: Correlation between caregivers stress and coping strategies, N=100

Variables	Mean	r-value	p-value	Remark
Stress	21.79	-0.519	0.000	S
Coping strategies	69.31			

The present study reveals that there is a moderately negative co- relation between stress and coping strategies (r-value= - 0.519, p-value=0.000) at 0.05 level of significant. It signifies that higher stress leads the lower coping strategies and whereas higher the coping strategies lower the stress.

4. Discussion

The present study was conducted to assess the stress and coping strategies adopted by primary caregivers of schizophrenia patients at GMCH, Guwahati, Assam. The data was collected from 100 primary caregivers of schizophrenia patients from the psychiatry department both inpatient and outpatient unit by using an interview schedule. The study result showed that majority i.e. 59 (59%) participants were female, majority of the subjects i.e. 59 (59%) were age group of more than 40 years, subjects 63 (63%) belongs to Hindu religion. Out of 100 samples majority of the participants i.e. 40 (40%) were educated up to Higher Secondary, majority of the participants i.e. 72 (72%) were married. According to monthly family income majority 35 (35%) of samples monthly family income were more than 40,000 and 73 (73%) samples belonged to nuclear family. It was found that majority 38 (38%) of samples had private service, 69 (69%) of samples were from urban area, Majority i.e. 59 (59%) samples were parents of the patients and 43 (43%) were providing care to patients since 7-10 years.

Assessment of stress of primary caregivers of schizophrenia patients:

The finding of the present study revealed that majority i.e. 88% of caregivers suffers from moderate level of stress and only 12% feels high stress.

Present study finding are consistent with the study conducted by Darlami K., Ponnose R., Jose P. (2015) on “Caregiver’s stress of psychiatric patients” at inpatient and outpatient units of Universal college of medical Sciences, Teaching hospital. Results showed that stress level of respondents revealed that majority of respondents (86%) were at moderate stress, followed by 14% with severe

stress.¹⁰ The finding of the study supported by another similar study conducted by Treveli S. M, Uppendra S. (2018) “stress and coping strategies among family members of patients with schizophrenia” at rehabilitation centre of Pune city, on both man and women of 50 families of clients with schizophrenia, The result showed that the overall stress score of respondent was 50.9% and overall coping strategies score was found to be 23.8%. the clients suffers from moderate stress with few coping strategies.²

Assessment of coping strategies of primary caregivers of schizophrenia patients:

Analysis of the present study showed that majority i.e. 68% had moderate cope, 24% had inadequate cope and 8% had adequate cope. Out of 100 samples, self distraction (7.66 ± 0.476) was used most frequently by the caregivers to cope with the stress, denial (2.04 ± 0.281) and self blame (2.04 ± 0.281) were least frequently used by the caregivers to cope with the stress.

Present study finding are consistent with the study conducted by Pompeo D.A. et al (2016) on “Strategies for coping with family members of patients with mental disorders” at psychiatric hospital in the interior of the state of Sao Paulo. Results showed that the coping strategies most often used by family members were social support and problem solving. Mothers and father used more functional strategies (self-control $p=0.037$, positive reappraisal $p=0.037$, and social support $p=0.021$).⁹ Another study was conducted by Rahmani F. et al (2019) to support the study on “Coping strategies of family caregivers of patients with schizophrenia in Iran: A cross sectional survey” at one large teaching referral hospital in Iran. Results shows that, 23.1% used avoiding coping strategies.⁸

Correlation between caregivers stress and coping strategies:

The present study result revealed that there is a moderately negative significant co- relation between stress and coping strategies (r -value= -0.519 , p -value= 0.000) at 0.05 level of significant. The study was supported by the study conducted by Bharadwaj U.D., Hashmi J.F.(2018) on “assessment of the stress and coping strategies used by the family members of schizophrenia patients” on a selected hospital of New Delhi. Result shows that there was a statistically not significant negative correlation between stress and coping strategies as evident from the r -value of 0.338, p -value of 0.349 at 0.05 level of significance.⁵ Another study which supported the present study, conducted by Treveli S.M, Uppendra s. (2018) on “stress and coping strategies among family members of patients with schizophrenia” at rehabilitation centre of Pune city. The result showed that there was existence of negative relationship between stress and coping strategies ($r= -0.344^*$). It can be concluded that higher the stress, lesser is the coping aspects among the respondents.²

5. Conclusion

The finding of the study concluded that, the majority (88%) of the caregivers experience moderate level of stress and majority (68%) of the caregivers had a moderate level of

copied and it was found that self-destruction was used most frequently and denial and self-blame were the least used coping strategies followed by caregivers. The conclusion could be drawn from the present study that Stress can be leads to psychiatric illness in future life. Therefore, immediate action should take to reduce the stress and cope with all stressful events. Educating and creating awareness among the people can help to overcome the stress and adopt the coping strategies. Planned teaching program or structure teaching program to nurses can be implemented which will broaden the knowledge for caregivers. There is need of conducting such program and research frequently. The nurses should have the regular assessment programme for those who are having vulnerable to the stress. The findings of the study are consistent with the literature and have strong support from some of the studies of the world and India.

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